

## Form UI-HA 2011 Return for Household Employers Instructions

## **Unemployment Insurance Contributions**

#### You may file on-line at https://taxnet.ides.state.il.us

## Step 1

- Line 1a Enter your 7-digit Illinois Unemployment Insurance Account Number.
- **Line 1b** Enter the nine digit Federal Employer's Identification number (FEIN) assigned to you by the Internal Revenue Service.
- Line 2 Enter your first name, middle initial and last name.
- **Line 3** Enter the street address including the city, state and zip code where you want to receive this form.

## Step 2

Lines 6 through 14 - use one line for each employee

#### Column A

Print the last and first name(s) of your household employee(s).

#### Column B

Complete this item by copying your employee's social security number from his or her Social Security card.

### **Columns C through F (quarters)**

Enter the total wages paid to each employee for each quarter of the year. If no wages were paid for that quarter, please enter "0".

Wages include (a) salaries, commissions and bonuses, tips reported to the employer, separation pay, vacation pay, prizes, sick pay, payments on account of retirement; (b) the reasonable cash value of remuneration paid other than cash, such as goods, meals and lodging; and (c) any remuneration for services performed within the State which is considered wages under the Federal Unemployment Tax Act.

Line 15 If you had more than eight household employees during 2011, use an additional sheet of paper and include the information in Step 2 for each additional worker. Total each Column C through F on the attachment, and write the totals on Line 15 in the appropriate column.

**Line 16a** Add Lines 6 through 15 within each column. This is the total wages paid for each quarter.

## Step 3

Line 16b Copy totals from line 16a above.

Line 17 Write in the total wages paid in excess of the unemployment insurance taxable wage base amount for **each** worker. For 2011, the taxable wage base amount is \$12,740 for each worker. An employer must pay unemployment insurance contributions on only the first \$12,740 in wages for each employee.

**Example:** You have one household employee that you pay \$5,000 each quarter. During the first and second quarter, the wages paid to the employee total \$10,000, so you would enter "0" in each column for the first and second quarters. During the third quarter, the total amount paid to the employee reaches \$15,000 which exceeds the \$12,740 unemployment insurance taxable wage base by \$2,260. So the amount to be entered on Line 17 for the third quarter, is \$2,260 (\$15,000-\$12,740). The fourth quarter wages of \$5,000 must be entered on Line 17 for the fourth quarter since the wage base was met during the third quarter.

	1st quarter	2nd quarter	3rd quarter	4th quarter	
Ex Line 17	\$ 0	\$ 0	\$2,260	\$5,000	

## Step 3 continued

Line 18 Subtract Line 17 from Line 16b and enter the result on Line 18. These are your taxable wages.

#### **Lines 19 and 20**

For each quarter, calculate your unemployment insurance contribution. Within each column, complete either Line 19 or 20, whichever is applicable.

- Line 21 Quarter totals: Enter the amount from Line 19 or 20 in each column. This is your contribution due for each quarter.
- Line 22. Grand total. Add the quarterly totals from Line 21 (Columns C, D, E and F) and enter the result on Line 22. This is your 2011 total unemployment insurance contributions due.

## Step 4

Line 23-26 Enter the total number of employees (full or part time) who are covered by unemployment insurance and who performed services during or received pay for the payroll period including the 12th of each month of the quarter. Include workers who have earned more than \$12,740 in the calendar year and those on vacation or paid sick leave. Exclude workers on strike.

## Step 5

- Line 27 Write the amount shown on line 22. This is your total 2011 unemployment insurance contribution.
- Write the amount of any previous payment made to the Illinois Department of Employment Security for the liability shown on Line 27.
- Line 29 Subtract Line 28 from Line 27.

  This is the amount of unemployment insurance contribution due.

Make your check payable to the **Illinois Department of Employment Security.** 

## Step 6

Line 30 If you have stopped employing workers, write the date of the last day you employed workers.

## Step 7

attached.

Line 31 This report must be signed by the person named in Step 1, Line 2. If signed by any other person, a Power of Attorney must be

#### MAIL YOUR COMPLETED REPORT ALONG WITH YOUR CHECK TO:

ILLINOIS DEPARTMENT OF EMPLOYMENT SECURITY PO BOX 3637 SPRINGFIELD IL 62708-3637

## **General Instructions**

## What if I do not file or pay by the due date?

If you do not file a processable return or pay the tax you owe by the due date, you will owe penalty and interest.

## What if I need to correct information I reported? Where may I obtain help or more information?

For other related forms or help with questions regarding unemployment insurance, please call the Unemployment Insurance Hotline at 312 793-4880 or toll-free at 1 800 247-4984 (option 1).

The TTY number for the hearing impaired is (866) 212-8831.

# 2011 Form UI-HA 2011 Return for Household Employers Unemployment Insurance Contributions

**Illinois Department of Employment Security** 

File on-line at https://taxnet.ides.state.il.us

Ste	p 1: Tell us about yourself						
1a		b	s identification number				
	Illinois account number (Unemployment Insurance)						
2	Your name (first, middle initial, last)						
3	,						
•	Street Address		<del></del>				
	City	State	Zip				
Ste	p 2: Report your household employee	information					
5	For unemployment insurance reporting, complete Co	lumns A-F					
6	A Name (last, first)	<b>B</b> Social Security No.	<b>C</b> 1/2011 QTR. ending Mar. 31	2/2011 QTR. ending June 30	<b>E</b> 3/2011 QTR. ending Sept. 30	<b>F</b> 4/2011 QTR. ending Dec. 31	
7		•		•		•	
8			•	•	•	•	
9		•	•		•		
_		•	•	•		•	
10		• •	•	•	•	•	
11		• •	•	•	•	•	
12		• •		•		•	
13		<u> </u>	•	•		•	
14		: :	:	•		•	
15	Other (attach)			•		•	
16a	16a Column totals: Add Lines 7 through 15 in each column						
Ste	p 3: Figure your unemployment insur contribution due for each quarte		1st quarter	2nd quarter	3rd quarter	4th quarter	
16k	Column totals: Copy totals from line 16a above						
17	Write the total wages paid in excess of the taxawage base amount (\$12,740 per employee for						
18	Subtract Line 17 from Line 16b.						
19	If Line 16a is less than \$50,000, multiply Line 1 your 2011 contribution rate or 5.400%, <b>whiche</b>						
20	If Line 16a is \$50,000 or more, multiply Line 18 your 2011 contribution rate.	3 by					
21	Quarter totals: Enter the amount from Line 19	and/or 20.					
22	Grand total: Add the quarter totals from Line 21 (Columns C, D, E and F) and write the result on Line 22.						

			er of covered workers of each quarter. If non		time) who performed	services durir	ng or received pay for the payroll period inc	luding the	
23	1st quarter	Α	January 12	В	February 12	C	March 12		
24	2nd quarter	Α	April 12	В	May 12	C	June 12		
25	3rd quarter	Α	July 12	В	August 12	C	September 12		
26	4th quarter	Α	October 12	В	November 12	C	December 12		
Ste	p 5: Figure y	your	total unemployme	ent insuran	ce contribution d	lue			
27	Write the amo	unt fro	m Line 22.					27	
28	Write the amo	unt of	any previous paymen	t to the Illinois	Department of Emplo	oyment Secur	ty for the liability shown on Line 27.	28	
29	Subtract Line 2	28 fror	m Line 27. Make your	check payabl	e to the Illinois Depa	rtment of En	ployment Security.	29	I
			you are no longer		g workers			30	month day year
Ste	p 7: Sign be	low							
	Under penaltie	es of p	erjury, I state that I ha	ive examined	this report and, to the	best of my kr	nowledge, it is true, correct, and complete.		
31								()	
	Household emplo	oyer's s	ignature (full name)				month day year	Daytime te	elephone number
Filin	g deadline: <b>Ap</b>	oril 1	6. 2012						

You may file and pay on-line at https://taxnet.ides.state.il.us

Mail your completed report along with your check to:

ILLINOIS DEPARTMENT OF EMPLOYMENT SECURITY PO BOX 3637 **SPRINGFIELD IL 62708-3637** 

Step 4: Number of employees who are covered for unemployment insurance

This state agency is requesting information that is necessary to accomplish the statutory purpose as outlined under 820 ILCS405/100-3200. Disclosure of this information is REQUIRED. Failure to disclose this information may result in statutorily prescribed liability and sanction, including penalties and or interest. This form has been approved by the Forms Management Center.

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